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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2) SMALL								ENTITY	OR		R THAN ENTITY
FOR NUMBER			ER FILED	иимв	ER EXTRA		RATE	FEE		RATE	FEE
	C FEE CFR 1.16(a))							s	OR		\$
TOT.	AL CLAIMS CFR 1.16(c))		minus 20 = *				x \$ =			x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		/IS							OR		
			minus 3 = *			╽┟	X \$=		OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$ =		OR	+ \$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
CLAVIS AS AMENDED - PART II											
1011									OR	OTHE	R THAN
•	717	(Lium 1) CLAIMS	1 - 1	(Column 2) HIGHEST	(Column 3)	ır	SMALL E	NTITY	٠,٠	SMALL	ENTITY
Α		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONA		RATE	ADDI-
AMENDMENT		AMENDMENT		PAID FOR				FFE			TIONAL FEE
	Total (37 CFR 1.16(c))	33	Minus	<u>"57</u>	=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus	<u>"12-</u>	=		x \$		OR	x \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$ =		OR	+s =	
						L	TOTAL			TOTAL	
							ADD'L FEE		OR	ADD'L FEE	
-		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	I Г			l		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE -	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=		x \$ =	7 6-6	OD	x \$ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=				OR		
						ŀ	X \$=		OR	x \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						L	+ \$ = TOTAL		OR	+ \$ = TOTAL	-
							ADD'L FEE		OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)									•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=		× \$=				
	FIRST DESCRITATION OF MULTIDLE DEDENDENT CLAIM /27 CFD 4 46/4/\					╽┟			OR 3		
لتــا	FIRST PRESENTATION, OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					L	+ \$ =	_	OR	+ \$= TOTAL	
t If the paths in polymon 4 is location than the safety is active 2 with 100 to active 2							ADD'L FEE		OR	ADD'L FEE	L
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.